

REQUEST FOR CHANGE

EPA ID #: CTD 001164672

COMPANY NAME: Walter American Forgings

Date of Request: \_\_\_\_\_

TOWN: Windsorburg

	SECTION/ITEM TO BE CHANGED	OLD VALUE	NEW VALUE	REASON/COMMENTS
I*	Name of Installation			
II**	Location of Installation			
III	Installation Mailing Address		7/1/92 ①	
IV a.	Installation Contact's Name		Flewelling, Hal	BR - 1991
b.	Installation Contact Title			
c.	Installation Contact Phone #			
V a.	Ownership & Address			DATE OF OWNERSHIP CHANGE:
b.	Property Owner & Address			DATE OF OWNERSHIP CHANGE:
VI	Status	(Originally notified as:)  SQG (<100 kg) SQG (100-1000kg) GENERATOR TRANSPORTER TSDF	Change status to:	

\* Corresponds to numbering on EPA Notification of Hazardous Waste Activity Form.

\*\* If your company has moved to a new location then you must submit a new EPA Notification of Hazardous Waste Activity Form and obtain a new US EPA ID No.

**REQUEST FOR CHANGE**

EPA ID #: CTD 001164672

COMPANY NAME: Chase Brass &amp; Copper Co-Forged Com

TOWN: Waterbury

	SECTION/ITEM TO BE CHANGED	OLD VALUE	NEW VALUE	REASON/COMMENTS
* I	Name of Installation	Chase Brass & Copper Co-Forged	Waltec American Forgings Inc.	per 1987 Report
II	Location of Installation			
III	Installation Mailing Address			
IV a.	Installation Contact's Name	Walter American Forgings Inc.	John A. Nelmes	
b.	Installation Contact Title		Plant Engineer	
c.	Installation Contact Phone #			
V a.	Ownership			
b.	Property Owner			
VI	Status	(Originally notified as:) SQG (<100kg)  SQG (100-1000kg)  GENERATOR  TRANSPORTER  TSDF	Change status to:	
X	EPA Waste Number(s)  TSD Facility Process Changes (handling methods).			

\* Corresponds to numbering on EPA Notification of Hazardous Waste Activity Form.





U.S. ENVIRONMENTAL PROTECTION AGENCY  
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

### III LOCATION OF INSTALLATION

Chase Brass &  
Copper Co - Forged.

PLEASE PLACE LABEL IN THIS SPACE

IN.

**INSTRUCTIONS:** If you received a preprinted label, attach it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the **INSTRUCTIONS FOR FILING NOTIFICATION** before completing this form. The information requested herein is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

FOR OFFICIAL USE ONLY

## COMMENTS

[illegible]

INSTALLATION'S EPA I.D. NUMBER										APPROVED		DATE RECEIVED (yr., mo., & day)	
S								T	A	C			
F	C	T	D	O	O	L	I	6	4	6	7	2	840517

## I. NAME OF INSTALLATION

[illegible]

## II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX																									
C	3	7	3	0	N	O	R	T	H	M	A	I	N	S	T	P	O	B	O	X	3	5			

15 16															CITY OR TOWN										ST.			ZIP CODE				
C															4 W A T E R B U R Y										C T			0 6 7 2 0				

### III. LOCATION OF INSTALLATION

[illegible][illegible]

## IV. INSTALLATION CONTACT

[illegible]

### V. OWNERSHIP

[illegible]

15 16 <b>B. TYPE OF OWNERSHIP</b> (enter the appropriate letter into box)		<b>VI. TYPE OF HAZARDOUS WASTE ACTIVITY</b> (enter "X" in the appropriate box(es))	
F = FEDERAL M = NON-FEDERAL	M 36	<input checked="" type="checkbox"/> 37 <b>A. GENERATION</b> <input type="checkbox"/> 39 <b>C. TREAT/STORE/DISPOSE</b>	<input type="checkbox"/> 38 <b>B. TRANSPORTATION</b> (complete item VII) <input type="checkbox"/> 60 <b>D. UNDERGROUND INJECTION</b>

**VII. MODE OF TRANSPORTATION** (transporters only – enter “X” in the appropriate box(es))

☐ 61 A. AIR    ☐ 62 B. RAIL    ☒ 63 C. HIGHWAY    ☐ 64 D. WATER    ☐ 65 E. OTHER (specify):

### VIII. FIRST OR SUBSEQUENT NOTIFICATION

**VIII. FIRST OR SUBSEQUENT NOTIFICATION**  
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☐ A. FIRST NOTIFICATION      ☒ B. SUBSEQUENT NOTIFICATION (complete item C)

## IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

EPA Form 8700-12 (6-80)

**CONTINUE ON REVERSE**



# IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE (D001) ☒ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☐ 4. TOXIC (D000)

## X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE (type or print)	DATE SIGNED
<i>David Knauf</i>	DAVID KNAUF PLT MGR	3/26/84



ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

CTD001164672

INSTALLATION ADDRESS

CHASE BRASS & COPPER CO-FORGED COMP DI  
730 NORTH MAIN ST  
WATERBURY CT 06704

730 NORTH MAIN ST  
WATERBURY CT 06704



U.S. ENVIRONMENTAL PROTECTION AGENCY  
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

**INSTRUCTIONS:** If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the **INSTRUCTIONS FOR FILING NOTIFICATION** before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

INSTALLATION'S EPA I.D. NO.	CHASE BRASS & COPPER CO., INC. FORGED COMPONENTS DIVISION 730 North Main St. Waterbury, Conn. 06704  PLEASE PLACE LABEL IN THIS SPACE
I. NAME OF INSTALLATION	
II. INSTALLATION MAILING ADDRESS	
III. LOCATION OF INSTALLATION	

FOR OFFICIAL USE ONLY

[illegible]

AUG 18 3 15 PM '80

I. NAME OF INSTALLATION																																							
C	H	A	S	E			B	R	A	S	S		&		C	O	P	P	E	R		C	O	-	F	O	R	G	E	D		C	O	M	P		D	I	V.

H. INSTALLATION MAILING ADDRESS																												
STREET OR P.O. BOX																												
C																												
3	7	3	0		N	O	R	T	H		M	A	I	N		S	T											
15	16															ST.	ZIP CODE											
C																												
4	W	A	T	E	R	B		U	R	Y																		
																		C	T	0	6	7	0	4				

III. LOCATION OF INSTALLATION																				
STREET OR ROUTE NUMBER																				
C																				
	5	7	3	0	N	O	R	T	H	M	A	I	N	S	T					
18	16															45				
CITY OR TOWN															ST.	ZIP CODE				
C																				
	6	W	A	T	E	R	B	U	R	Y										
															40	41	42	47	-	51

IV. INSTALLATION CONTACT																																		
NAME AND TITLE (last, first, & job title)															PHONE NO. (area code & no.)																			
2	M	I	C	H	L	I	N	D	A	V	I	D	G	E	N	M	A	N	A	G	E	R	2	0	3	-	7	5	7	-	9	8	4	1
															45 - 46 - 48		49 - 51		52 - 55															

V. OWNERSHIP																											
A. NAME OF INSTALLATION'S LEGAL OWNER																											
0	K	E	N	N	E	C	O	T	T		C	O	R	P	O	R	A	T	I	O	N						

15 16 <b>B. TYPE OF OWNERSHIP</b> (enter the appropriate letter into box)		<b>VI. TYPE OF HAZARDOUS WASTE ACTIVITY</b> (enter "X" in the appropriate box(es))	
F = FEDERAL M = NON-FEDERAL	M	<input checked="" type="checkbox"/> 57 A. GENERATION	<input checked="" type="checkbox"/> 58 B. TRANSPORTATION (complete item VII)
	59	<input type="checkbox"/> 59 C. TREAT/STORE/DISPOSE	<input type="checkbox"/> 60 D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

<input type="checkbox"/> A. AIR	<input type="checkbox"/> B. RAIL	<input checked="" type="checkbox"/> C. HIGHWAY	<input type="checkbox"/> D. WATER	<input type="checkbox"/> E. OTHER (specify):
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<b>VIII. FIRST OR SUBSEQUENT NOTIFICATION</b>	
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.	
<input checked="checked" type="checkbox"/> <b>A. FIRST NOTIFICATION</b>	<input type="checkbox"/> <b>B. SUBSEQUENT NOTIFICATION</b> <i>(complete item C)</i>

**IX. DESCRIPTION OF HAZARDOUS WASTES**  
Please go to the reverse of this form and provide the requested information.



W	C	T	D	O	O	I	I	6	4	6	7	2	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

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☐ 1. IGNITABLE  
(D001)

☒ 2. CORROSIVE  
(D002)

☐ 3. REACTIVE  
(D003)

☒ 4. TOXIC  
(D000)

## X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE <i>Robert C. Ruhl</i>	NAME & OFFICIAL TITLE (type or print) Robert C. Ruhl Vice President-Engineering	DATE SIGNED August 13, 1980
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